

## PATIENT THERAPY RECORD

1–15 minutes = 1 unit  
 16–37 minutes = 2 units  
 38–52 minutes = 3 units  
 53–67 minutes = 4 units

“T”—Therapist not available:  
 (1) Ill  
 (2) Medical appointment  
     with another child  
 (3) Meeting  
 (4) Other

“P”—Patient not available:  
 (1) Ill  
 (2) School cancelled  
 (3) Parent cancelled  
 (4) Failed appointment  
 (5) Holiday  
 (6) Other

S—Patient cooperation was:  
 (A) Good  
 (B) Fair  
 (C) Poor  
  
 O—Direct/Indirect

A—Response to treatment:  
 (A) Good  
 (B) Fair  
 (C) Poor

P—Plan:  
 (A) Continue  
 (B) Modify  
 (C) Re-evaluate  
 (1) MTU conference  
 (2) Private  
 (3) CCS special center

Month:		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total	
DIRECT	S.																																	
	O: Treatment																																	A
	Evaluation																																	B
	Case conference																																	C
	Field visit																																	D
INDIRECT	Mileage																																	E
	Consultation																																	F
	Documentation																																	G
	Other																																	H
	A:																																	
P:																																		

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Signature(s) \_\_\_\_\_ Date \_\_\_\_\_

<input type="checkbox"/> Physical Therapy <input type="checkbox"/> Occupational Therapy		Treatment diagnosis		Primary diagnosis	
Patient name		Date of birth		Social security number	
				MTU and county number	
				CCS number	
Year	Quarter	Medical direction	County of legal residence	Therapy D/C	